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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	Wilson
First Named Inventor	Wilson
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Optical stack of removable lenses for face shields, windows, and displays

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0291-0092

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 355(e) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)				
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input checked="" type="checkbox"/> Customer Number 21891 → <input type="checkbox"/> Place Customer Number Bar Code Label here <input type="checkbox"/> Registered practitioner(s) name/registration number listed below						
Name	Registration Number	Name	Registration Number			
Richard D. Slehofer	29,440					
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.						
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label 21891 OR <input type="checkbox"/> Correspondence address below						
Name	Richard D. Slehofer					
Address	875 S. Westlake Blvd.					
Address	Suite 201					
City	Westlake Village	State	CA			
Country	USA	Telephone	805.496.9539			
		Fax	805.496.7540			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle if any)		Family Name or Surname				
Bart	Wilson					
Inventor's Signature				Date	11/24/99	
San Juan Capistrano	State	CA	Country	USA	Citizenship	USA
Post Office Address	27128 Paseo Espada					
Post Office Address	Suite 1503					
San Juan Capistrano	State	CA	ZIP	92675	Country	USA
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto						

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Approved for use through 8/30/98. OMB 0651-0032

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PTO/SB/02A (3-97)

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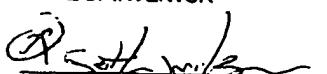
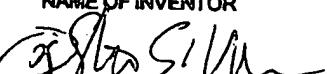
DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Seth		Wilson					
Inventor's Signature							Date
San Juan Capistrano	State	CA	Country	USA	Citizenship	USA	11/24/99
Post Office Address	27128 Paseo Espada						
Post Office Address	Suite 1503						
City	State	CA	ZIP	92675	Country	USA	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Stephen S.		Wilson					
Inventor's Signature							Date
San Juan Capistrano	State	CA	Country	USA	Citizenship	USA	11/24/99
Post Office Address	27128 Paseo Espada						
Post Office Address	Suite 1503						
City	State	CA	ZIP	92675	Country	USA	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature							Date
Residence: City	State		Country		Citizenship		
Post Office Address							
Post Office Address							
City	State		ZIP		Country		

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STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR		Docket Number (Optional)
Applicant, Patentee, or Identifier: <u>Wilson, Wilson, and Wilson</u>		
Application or Patent No.: _____		
Filed or Issued: _____		
Title: <u>Optical stack of removable lenses for face shields, windows, and displays</u>		
<p>As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> the specification filed herewith with title as listed above. <input type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above. <p>I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).</p> <p>Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No such person, concern, or organization exists. <input type="checkbox"/> Each such person, concern, or organization is listed below. 		
<p>Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)</p> <p>I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))</p>		
<u>Bart Wilson</u> <small>NAME OF INVENTOR</small>  <small>Signature of Inventor</small> <u>11/19/99</u> <small>Date</small>	<u>Seth Wilson</u> <small>NAME OF INVENTOR</small>  <small>Signature of Inventor</small> <u>11/19/99</u> <small>Date</small>	<u>Stephen S. Wilson</u> <small>NAME OF INVENTOR</small>  <small>Signature of Inventor</small> <u>11/19/99</u> <small>Date</small>

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